

In the United States District Court

For the _____ District of _____

Name: WAYNE SMITH)Prison ID #: 32024-007)Name: Carb, S. E. Crawford)Prison ID #: 10620-007)

Name: _____)

Prison ID #: _____)

☐ Check here if there are additional
Plaintiffs--use separate sheet to
list each person. DO NOT USE ET AL.

vs.)

Name: John Doe AKA Prison Director)Name: John Doe AKA Regional Director)Name: Charles T. Feltb, Warden)

Name: _____)

☐ Check here if there are additional
Defendants--use separate sheet to
list each person. DO NOT USE ET AL.

Complaint for the Violation of Civil Rights
Under 42 U.S.C. § 1983

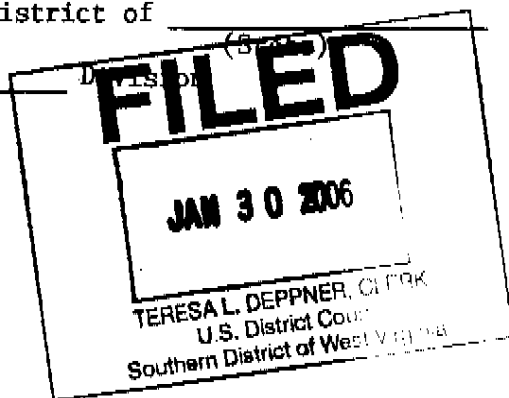
I. Previous Lawsuits

A. Have you or any of the other plaintiffs listed above filed any other lawsuits in the United States District Courts and/or any state courts?

☐ Yes☒ No

B. If you answered YES to Question A, list the following information:

☐ Check here if more than one lawsuit has been filed and list them on additional sheets

Civil Action #: 5:06-0065

(To be assigned by the Clerk's
Office. Do not write in this blank.)

1. Parties to previous lawsuit:

Plaintiffs: _____

Defendants: _____

2. In what Court did you file the previous lawsuit?

(If Federal Court, name the District; if State Court, name the county.)

3. Case Number of the previous lawsuit: _____

4. Name of judge to whom the case was assigned: _____

5. Date previous lawsuit was filed: ____/____/____ (List at least the year.)

6. What was the disposition or result of the previous lawsuit? (for example, was it dismissed, appealed, or still pending)

7. When was previous lawsuit decided: ____/____/____ (List at least the year.)

8. Did the previous lawsuit involve the same facts or circumstances that you are now alleging in the lawsuit you are now submitting?

☐ Yes

☐ No

II. Place of Plaintiff(s)'s current confinement:

- A. Name of prison or jail in which you are currently incarcerated:

Berkley Federal Correctional Institution

- B. Are the facts of your lawsuit related to your confinement in your present prison or jail?

☒ Yes

☐ No

- C. If you answered NO to question B, list the name and address of the jail or prison to which the facts of your lawsuit relate:

D. Did you present these facts to the prison authorities through the prisoner grievance procedure?

☒ Yes

☐ No

E. If you answered Yes to question D:

1. What steps did you take: Filed Cop-out Complaint,
Administrative Remedy Complaint

2. What was result: no resolution or correction
violation of inmates constitutional rights

F. If you answered No to question D, explain why not: _____

III. Parties to this Lawsuit

A. Plaintiff(s) bring this lawsuit:

1. Name of Plaintiff: Curtis E. Crawford

Prison ID #: 10620-007

Address, include name of institution: Beckley FCI, P.O.
Box 350, Beaver, WV 25813

2. Name of Plaintiff: Wayne Smith

Prison ID #: 32024-007

Address, include name of institution: Beckley FCI, P.O.
Box 350, Beaver, WV 25813

3. Name of Plaintiff: _____

Prison ID #: _____

Address, include name of institution: _____

☐ Check here if there are additional plaintiffs and list them on additional sheet of paper.

- B. Defendants against whom you are filing this lawsuit:
For each defendant, check whether you are naming the defendant in his or her individual and/or official capacity.

1. Name of Defendant: John Doe AKA Director

Place of Employment: Federal Bureau of Prisons

Address of Defendant: 320 First Street, N.W.
Washington, D.C. 20001

Named in an official capacity? ☒ Yes ☐ No

Named in an individual capacity? ☐ Yes ☐ No

2. Name of Defendant: John Doe II AKA Regional Director

Place of Employment: Federal Bureau of Prisons

Address of Defendant: 10010 Junction Drive, Suite # 100-N
Baltimore Junction, Maryland 20701

Named in an official capacity? ☒ Yes ☐ No

Named in an individual capacity? ☐ Yes ☐ No

3. Name of Defendant: Charles T. Felts

Place of Employment: Federal Bureau of Prisons

Address of Defendant: P.O. Box 350
Beaver, W V 25813

Named in an official capacity? ☒ Yes ☐ No

Named in an individual capacity? ☐ Yes ☐ No

- ☐ Check here if there are more than 3 defendants. You must list each and every defendant. If you do not list the name of a defendant, he or she will not be included in the lawsuit. If you do not list the place of employment and address the clerk will not be able to serve that defendant. Use addition sheets of paper to list more than 3 defendants.

IV. Statement of your claim

State as briefly as possible all the facts of your case. Recite the dates when any incidents or events occurred, and the places where they took place. Describe how each defendant is involved. Also include the names of other persons involved and the dates and places of their involvement.

If you set forth more than one claim, number each one, and use a separate paragraph for each one.

The Director, Regional Director, and Warden Charles T. Felt are allowing the Prison staff at Buckley Federal Correction Institution to house inmates unlawfully in Bubble Areas that lack proper and adequate ventilation, desk, chair, poor lighting, couple with poor hygiene promoted by Prison officials failure to issue adequate health care items such as soap, deodorant, and etc.

II Inmates in (3) Three men cell and (12) Twelve men cell are directly discriminated against, and lack proper and adequate space between Bed and Beds are attached to beds that make it difficult for inmate to sleep.

III Inmates suffer from sound pollution, because Bubble and (3) Three men cell were not properly designed or planned.

IV Most Locker are in disrepair

V Most mattresses are without proper cover.

VI Housing is cruel and unusual Punishments, See: Attached Complaint

See: Attached.

V. Relief requested: List what you want the court to do; list what relief you seek against each defendant:

- A. Court Order Certifying Class Action
- B. Compensatory Damages of \$200,000.00 Two hundred thousand dollars
- C. Punitive Damages as determined by Court
- D. Assignment of Class Counsel
- E. Restraint + Restraint order against Repress of Retaliation by staff during pendence of case.

I (we) hereby certify under penalty of perjury that the above complaint is true to the best of my (our) information, knowledge and belief.

Signed this 26 day of JANUARY, 2006.

Signature: Wayne Smith

Prison ID #: 32024-007

Address: Pine Bl. P.O. Box 350 Beaver, WASH V. 25813

X Wayne Smith

Signature: [Signature]

Prison ID #: 10620-007

Address: P.O. Box 350, Beaver W & 25813

X

Signature: _____

Prison ID #: _____

Address: _____

☐ Check here if additional signatures are included on an additional sheet of paper.

All plaintiffs must sign complaint.